

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS (BEAUMONT)

DEC 11 2013

In re: Sycamore Glen Holdings, LLC
Debtor

Case # 11-10422
Chapter 7

NOTICE OF TRANSFER OF CLAIM PURSUANT TO
F.R.B.P. RULE 3001 (E) (1)

Transferor:
Georgene E. Smith
2451 Cimarrone Blvd
St. Johns, FL 32259
Phone 904-287-5030

Transferee:
JM Partners LLC
ATTN: John Marshall / Mng Mbr
6800 Paragon Place Suite 202
Richmond, VA 23230-1656
Phone: 804-285-0807

The claim in the amount of \$ 74,435.00 against the Debtor has been transferred.

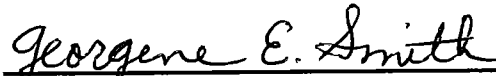
No action is required if you do not object to the Transfer of the claim. However, IF YOU OBJECT TO THE TRANSFER OF THE CLAIM, WITHIN 20 DAYS OF THE DATE OF THIS NOTICE, YOU MUST:

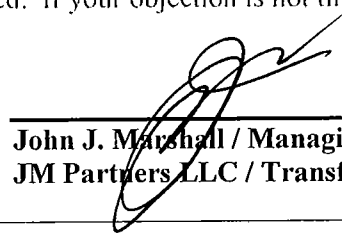
- FILE A WRITTEN OBJECTION TO THE TRANSFER with:

USBC Eastern District of Texas
ATTN: Clerk
300 Willow Street
Beaumont, TX 77701

- SEND A COPY OF YOUR OBJECTION TO THE TRANSFEREE

If you filed an objection, a hearing will be scheduled. If your objection is not timely filed, then the Transferee will be substituted as the Claimant.


Georgene E. Smith
For: Transferor


John J. Marshall / Managing Member
JM Partners LLC / Transferee

FOR CLERKS OFFICE USE ONLY:

This notice was mailed to the first party by first class postage prepaid mail on: _____

Copy: (check) Claims Agent _____ Transferee _____ Debtor's Attorney _____

Clerk

B10 (Official Form 10) (04/10)

UNITED STATES BANKRUPTCY COURT Eastern District of Texas		PROOF OF CLAIM
Name of Debtor: Sycamore Glen Holdings, LLC		Case Number: 11-10422
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.		
Name of Creditor (the person or other entity to whom the debtor owes money or property): Georgene E. Smith		<input type="checkbox"/> Check this box to indicate that this claim amends a previously filed claim. Court Claim Number: _____ (If known) Filed on: _____
Name and address where notices should be sent: Georgene E. Smith 2451 Clamarrone Blvd. Saint Johns, FL 32259-2184		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Telephone number: 904 287-5030		
Name and address where payment should be sent (if different from above):		<input type="checkbox"/> Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check this box if you are the debtor or trustee in this case.
Telephone number:		
1. Amount of Claim as of Date Case Filed: <u>\$74,435.00</u> If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4. If all or part of your claim is entitled to priority, complete item 5. <input checked="" type="checkbox"/> Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount. Specify the priority of the claim. <input type="checkbox"/> Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B). <input type="checkbox"/> Wages, salaries, or commissions (up to \$11,725* earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4). <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5). <input type="checkbox"/> Up to \$2,600* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7). <input type="checkbox"/> Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8). <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. §507 (a)(____). Amount entitled to priority: \$ _____ *Amounts are subject to adjustment on 4/1/13 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.
2. Basis for Claim: <u>MONEY LOANED</u> (See instruction #2 on reverse side.) 3. Last four digits of any number by which creditor identifies debtor: _____ 3a. Debtor may have scheduled account as: <u>Pensco TRUST</u> (See instruction #3a on reverse side.)		
4. Secured Claim (See instruction #4 on reverse side.) Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information. Nature of property or right of setoff: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other Describe: Value of Property: \$ _____ Annual Interest Rate: % Amount of arrearage and other charges as of time case filed included in secured claim, If any: \$ _____ Basis for perfection: Amount of Secured Claim: \$ _____ Amount Unsecured: \$ _____		6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim. 7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.) DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING. If the documents are not available, please explain:
Date: <u>8-25-11</u> Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. <u>Georgene E. Smith</u>		
Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any. <u>Georgene E. Smith</u>		FOR COURT USE ONLY

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF TEXAS (BEAUMONT)

In re: **Sycamore Glen Holdings, LLC**
Debtor

Case # **11-10422**
Chapter 7

**AFFIDAVIT AND IDENTIFICATION OF CREDITOR / SELLER'S
AUTHORIZED REPRESENTATIVE**

I, **Georgene E. Smith**, acting in my individual capacity ("Creditor" or "Seller"), am the Authorized Representative for the Creditor, and declare as follows:

- 1) Seller is the original filer of a claim in this case which is noted on the clerk's register of claims. Evidence of these facts is included herewith.
- 2) Creditor has knowingly and consciously decided to sell and assign any and all interest in such Claim to **JM Partners LLC**. Creditor hereby grants all interest in such claim and any funds that might ultimately be generated by same to **JM Partners LLC**, and agrees to provide any further court required supporting evidence, or execute any other required forms that confirm this fact and/or are necessary for the full transfer of such interest.
- 3) Creditor has not previously sold their Claim or rights to same to any other party, and is still the owner of the claim, is entitled to payment, and is selling all such rights and entitlement solely to **JM Partners LLC**.

I hereby certify that the foregoing statements are true and correct to the best of my knowledge and belief.

Georgene E. Smith
Name of Creditor

Georgene E. Smith
Georgene E. Smith

Last 4 Digits of SS # 8156
Current Telephone # 904.287.5030

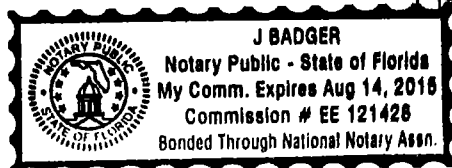
Sworn to and Subscribed before me on this

4 day of Dec, 2013

NOTARY PUBLIC

State of FL

City/County of St Johns



JM Partners LLC

**6800 Paragon Place Suite 202
Richmond, VA 23230-1656**

Phone 804-285-0807
Fax 804-285-0939

Email jmarshall@jmpartnersllc.com

December 8, 2013

USBC Eastern District of Texas
ATTN: Clerk
300 Willow Street
Beaumont, TX 77701

RE: JMP File # 74388e SYCAMORE

Gentlemen –

Please find enclosed a Notice of Transfer of Claim – along with the \$25.00 filing fee for same - relating to:

Case Number	11-10422
Debtor	Sycamore Glen
Creditor / Claimant	JM Partners LLC as Assignee of <u>Georgene E. Smith</u>
Amount	<u>\$ 74,435.00</u>

With respect to Notice of this action: *I hereby certify that a true and correct copy of the Notice of Transfer of Claim was provided on the date first referenced above,* via postage prepaid first class US Mail to the following parties of interest:

Transferor:
Georgene E. Smith
2451 Cimarrone Blvd
St. Johns, FL 32259

Trustee:
Stephen J. Zayler, Trustee
123 E. Lufkin Avenue
PO Box 150743
Lufkin, TX 75915-0743

Very truly yours,


John J. Marshall
Managing Member